

# Indiana Patient Registry Training

Injury

# Injury Screen

Demographics

Injury

Pre-Hospital

Referring

ED / Acute Care

Initial Assessment

Diagnosis

Comorbidity

Procedures

Complications / PI

Outcome

► Edit Incident » Trauma Incident Form (Full Record with ICD-10) » Injury »

Mark As Completed

Injury has not been submitted.

Injury Location

Location Site: - Location Site - \*

Favorite Location:

Postal Code: \* Country: United States \*

City: \* County: \* State: \* Lookup

Add to Favorite Locations

ICD 10 Location

Search \*

Type keyword(s) or ICD-10 code #, i.e.:V95.4

Other

Supplemental Cause of Injury: Not Applicable

Injury Description:

2000 Characters left

Cause of injury

ICD-10 Primary E-Code

Search \*

Type keyword(s) or ICD-10 code #, i.e.:V95.4

Intentionality: - Intentionality - \*


Trauma Type: - Trauma Type - \*

Add

# Injury Screen – Injury Location

Demographics	Injury	Pre-Hospital	Referring	ED / Acute Care	Initial Assessment	Diagnosis	Comorbidity	Procedures	Complications / PI
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► Edit Incident » Trauma Incident Form (Full Record with ICD-10) » Injury »

 Injury has not been submitted.

### Injury Location

**Location Site:** - Location Site - \*


**Favorite Location:**

Postal Code: \* Country: United States \*

City: \* County: \* State: \* [Lookup](#)

☐ Add to Favorite Locations

#### ICD 10 Location

 Search \* [LOOKUP](#)

Type keyword(s) or ICD-10 code #, i.e.:mobile home garage

### Other


**Supplemental Cause of Injury:** Not Applicable

**Injury Description:**

2000 Characters left

### Cause of injury

#### ICD-10 Primary E-Code

 Search \* [LOOKUP](#) [CLEAR](#)

Type keyword(s) or ICD-10 code #, i.e.:V95.4

**Intentionality:** - Intentionality - \*

**Trauma Type:** - Trauma Type - \*

[+ Add](#)

# Injury Screen – Injury Location (2)

Demographics	Injury	Pre-Hospital	Referring	ED / Acute Care	Initial Assessment	Diagnosis	Comorbidity	Procedures	Complications / PI
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► Edit Incident » Trauma Incident Form (Full Record with ICD-10) » Injury »

⚠ Injury has not been submitted.

**Injury Location**

Location Site: - Location Site - \*

Favorite Location:

Postal Code: \* Country: United States \*

City: \* County: \* State: \* 

Lookup

☐ Add to Favorite Locations

**ICD 10 Location**

Search

Type keyword(s) or ICD-10 code #, i.e.:V95.4

LOOKUP

**Other**

Supplemental Cause of Injury: Not Applicable

Injury Description: 

2000 Characters left

**Cause of injury**

**ICD-10 Primary E-Code**

Search

Type keyword(s) or ICD-10 code #, i.e.:V95.4

LOOKUP

CLEAR

Intentionality: - Intentionality - \*

Trauma Type: - Trauma Type - \*

+ Add

# Injury Screen – Injury Location (3)

Demographics	Injury	Pre-Hospital	Referring	ED / Acute Care	Initial Assessment	Diagnosis	Comorbidity	Procedures	Complications / PI
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► Edit Incident » Trauma Incident Form (Full Record with ICD-10) » Injury »

**Injury has not been submitted.**

### Injury Location

**Location Site:** - Location Site - \*

**Favorite Location:** \*

Postal Code: \* Country: United States \*

City: \* County: \* State: \* **Lookup**

☐ Add to Favorite Locations

### ICD 10 Location

Search \* **LOOKUP**

Type keyword(s) or ICD-10 code #, i.e.:mobile home garage

### Other

**Supplemental Cause of Injury:** Not Applicable

**Injury Description:**

2000 Characters left

### Cause of injury

#### ICD-10 Primary E-Code

Search \* **LOOKUP** **CLEAR**

Type keyword(s) or ICD-10 code #, i.e.:V95.4

**Intentionality:** - Intentionality - \*

**Trauma Type:** - Trauma Type - \*

**+ Add**

# Injury Screen – Injury Location (4)

Demographics	Injury	Pre-Hospital	Referring	ED / Acute Care	Initial Assessment	Diagnosis	Comorbidity	Procedures	Complications / PI
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► Edit Incident » Trauma Incident Form (Full Record with ICD-10) » Injury »

Injury has not been submitted.

**Injury Location**

Location Site: - Location Site - \*

Favorite Location:

Postal Code \* Country United States \*

City \* County \* State \* [Lookup](#)

☐ Add to Favorite Locations

**ICD 10 Location**

Search \* [LOOKUP](#)

Type keyword(s) or ICD-10 code #, i.e.:V95.4

**Other**

Supplemental Cause of Injury: Not Applicable

Injury Description: 

2000 Characters left

**Cause of injury**

**ICD-10 Primary E-Code**

Search \* [LOOKUP](#) [CLEAR](#)

Type keyword(s) or ICD-10 code #, i.e.:V95.4

Intentionality: - Intentionality - \*

Trauma Type: - Trauma Type - \*

[+ Add](#)

# Injury Screen – Lookup

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The screenshot shows a 'Lookup' dialog box with a title bar. Inside, there is instructional text: 'To search for a location, enter as much information as known and click on the "Search" button. Click on the location desired to populate the run form.' Below this, there are four labels on the left: 'State', 'County', 'City', and 'Postal Code:'. To the right of these labels are input fields. The 'State' field is a dropdown menu showing 'Indiana'. The 'County' field is a dropdown menu showing 'All Counties'. The 'City' and 'Postal Code' fields are empty text boxes. Below the input fields are three buttons: 'Search', 'Reset', and 'Set'. In the bottom right corner of the dialog is a 'Close' button with a standard window close icon. The dialog box is set against a background that appears to be a map or a data grid.

**Lookup**

To search for a location, enter as much information as known and click on the "Search" button. Click on the location desired to populate the run form.

State: Indiana

County: All Counties

City:

Postal Code:

Search Reset Set

Close

# Injury Screen – Lookup (2)

tion: No

To search for a location, enter as much information as known and click on the "Search" button. Click on the location desired to populate the run form. Close

**State**

**County**

**City**

**Postal Code:**

Search Reset Set

City	County	State	Postal Code
Adams (County)	Adams	IN	
Berne	Adams	IN	46711
Berne	Adams	IN	46769
Bingen	Adams	IN	
Blue Creek (Township of)	Adams	IN	
Bobo	Adams	IN	
Ceylon	Adams	IN	46740
Copess Corner	Adams	IN	46772
Decatur	Adams	IN	46733
Elm Tree Crossroads	Adams	IN	

Records 1-10 of 32 Next

Goto Page: **1** ... 2 3 ... 4



# Injury Screen – Injury Location (5)

Demographics	Injury	Pre-Hospital	Referring	ED / Acute Care	Initial Assessment	Diagnosis	Comorbidity	Procedures	Complications / PI
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► Edit Incident » Trauma Incident Form (Full Record with ICD-10) » Injury »

**Injury has not been submitted.**

### Injury Location

**Location Site:** - Location Site - \*

**Favorite Location:**

Postal Code:  \* Country: United States  \*

City:  \* County:  \* State:  \*

☐ Add to Favorite Locations

### ICD 10 Location

Search

Type keyword(s) or ICD-10 code #, i.e.:mobile home garage

### Other

**Supplemental Cause of Injury:** Not Applicable

**Injury Description:**

2000 Characters left

### Cause of injury

#### ICD-10 Primary E-Code

Search

Type keyword(s) or ICD-10 code #, i.e.:V95.4

**Intentionality:** - Intentionality - \*

**Trauma Type:** - Trauma Type - \*

# Injury Screen – Other

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**Injury Location**

**Location Site:**  \*

**Favorite Location:**

Postal Code  \* Country  \*

City  \* County  \* State  \*

☐ Add to Favorite Locations

**ICD 10 Location**

\*

Type keyword(s) or ICD-10 code #, i.e.:mobile home garage

**Other**

**Supplemental Cause of Injury:**


**Injury Description:**

2000 Characters left

# Injury Screen – Cause of Injury

**Cause of injury**

**ICD-10 Primary E-Code**

 Search

Type keyword(s) or ICD-10 code #, i.e., V95.4

Intentionality: - Intentionality -

Trauma Type: - Trauma Type -

+ Add

Code

Description

Intentionality

Trauma Type

No Records

**Abuse**

AbuseReport: - AbuseReport -

Investigation of physical abuse: - Investigation of physical abuse -

Caregiver at Discharge: - Caregiver at Discharge -

**Barriers To Patient Care**

**Barriers to Patient Care**

☐ Developmentally Impaired

☐ Physically Impaired

☐ Speech Impaired

☒ Not Applicable

☐ Hearing Impaired

☐ None

☐ Unattended or Unsupervised (including minors)

☐ Not Known

☐ Language

☐ Physically Restrained

☐ Unconscious

☐ Not Known/Not Recorded

← Back

 Save

 Save and Continue

# Injury Screen – E-Code Lookup

**Cause of injury**

**ICD-10 Primary E-Code**

\* **LOOKUP** **CLEAR**

Type keyword(s) or ICD-10 code #, i.e.:V95.4

**Intentionality:** - Intentionality - \* **Trauma Type:** - Trauma Type - \*

**+ Add**

Code	Description	Intentionality	Trauma Type
No Records			

**Abuse**

**AbuseReport:** - AbuseReport - \*

**Investigation of physical abuse:** - Investigation of physical abuse - \*

**Caregiver at Discharge:** - Caregiver at Discharge - \*

**Barriers To Patient Care**

**Barriers to Patient Care**

☐ Developmentally Impaired

☐ Physically Impaired

☐ Speech Impaired

☒ Not Applicable

☐ Hearing Impaired

☐ None

☐ Unattended or Unsupervised (including minors)

☐ Not Known

☐ Language

☐ Physically Restrained

☐ Unconscious

☐ Not Known/Not Recorded

**← Back**

**Save**

**Save and Continue**

# Injury Screen – E-Code Lookup (2)

**ICD injury**

**Category Search** **ICD 9 Conversion** **Advanced Search**

⊞ (V00-Y99) External causes of morbidity

⊞ (X50) Overexertion and strenuous or repetitive movements

⊞ (V00-V09) Pedestrian injured in transport accident

⊞ (V10-V19) Pedal cycle rider injured in transport accident

⊞ (V20-V29) Motorcycle rider injured in transport accident

⊞ (V30-V39) Occupant of three-wheeled motor vehicle injured in transport accident

⊞ (V40-V49) Car occupant injured in transport accident

⊞ (V50-V59) Occupant of pick-up truck or van injured in transport accident

⊞ (V60-V69) Occupant of heavy transport vehicle injured in transport accident

⊞ (V70-V79) Bus occupant injured in transport accident

⊞ (V80-V89) Other land transport accidents

⊞ (V90-V94) Water transport accidents

⊞ (V95-V97) Air and space transport accidents

⊞ (V98-V99) Other and unspecified transport accidents

⊞ (W00-W19) Slipping, tripping, stumbling and falls

⊞ (W20-W49) Exposure to inanimate mechanical forces

⊞ (W50-W64) Exposure to animate mechanical forces

⊞ (W65-W74) Accidental non-transport drowning and submersion

⊞ (W85-W99) Exposure to electric current, radiation and extreme ambient air temperature and pressure

⊞ (X00-X08) Exposure to smoke, fire and flames

⊞ (X10-X19) Contact with heat and hot substances


Select

Close

# Injury Screen – Cause of Injury (1)

**Cause of injury**

**ICD-10 Primary E-Code**

 Search

Type keyword(s) or ICD-10 code #, i.e.:V95.4

LOOKUP

CLEAR

Intentionality: 

- Intentionality -

\*

Trauma Type: 

- Trauma Type -

\*

+ Add

**Abuse**

AbuseReport: 

- AbuseReport -

\*

Investigation of physical abuse: 

- Investigation of physical abuse -

\*

Caregiver at Discharge: 

- Caregiver at Discharge -

\*

**Barriers To Patient Care**

**Barriers to Patient Care**

☐ Developmentally Impaired

☐ Physically Impaired

☐ Speech Impaired

☒ Not Applicable

☐ Hearing Impaired

☐ None

☐ Unattended or Unsupervised (including minors)

☐ Not Known

☐ Language

☐ Physically Restrained

☐ Unconscious

☐ Not Known/Not Recorded

Back


Save

Save and Continue

# Injury Screen – Cause of Injury (2)

**Cause of injury**


**ICD-10 Primary E-Code**

 Search

Type keyword(s) or ICD-10 code #, i.e.:V95.4

**Intentionality:** - Intentionality - \*

**Trauma Type:** - Trauma Type - \*



Code	Description	Intentionality	Trauma Type
No Records			

**Abuse**

**AbuseReport:** - AbuseReport - \*

**Investigation of physical abuse:** - Investigation of physical abuse - \*

**Caregiver at Discharge:** - Caregiver at Discharge - \*

**Barriers To Patient Care**

**Barriers to Patient Care**

☐ Developmentally Impaired

☐ Physically Impaired

☐ Speech Impaired

☒ Not Applicable

☐ Hearing Impaired

☐ None

☐ Unattended or Unsupervised (including minors)

☐ Not Known

☐ Language

☐ Physically Restrained

☐ Unconscious

☐ Not Known/Not Recorded



 Save

 Save and Continue

# Injury Screen – Abuse

---

## Abuse

AbuseReport: - AbuseReport - ▼ \*

Investigation of physical abuse: - Investigation of physical abuse - ▼ \*

Caregiver at Discharge: - Caregiver at Discharge - ▼ \*

## Barriers To Patient Care

### Barriers to Patient Care

- ☐ Developmentally Impaired
- ☐ Physically Impaired
- ☐ Speech Impaired
- ☒ Not Applicable

- ☐ Hearing Impaired
- ☐ None
- ☐ Unattended or Unsupervised (including minors)
- ☐ Not Known

- ☐ Language
- ☐ Physically Restrained
- ☐ Unconscious
- ☐ Not Known/Not Recorded

← Back

Save

Save and Continue



# Injury Screen – Equipment

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## Abuse

AbuseReport: - AbuseReport - ▼ \*

Investigation of physical abuse: - Investigation of physical abuse - ▼ \*

Caregiver at Discharge: - Caregiver at Discharge - ▼ \*

## Barriers To Patient Care

### Barriers to Patient Care

- ☐ Developmentally Impaired
- ☐ Physically Impaired
- ☐ Speech Impaired
- ☒ Not Applicable

- ☐ Hearing Impaired
- ☐ None
- ☐ Unattended or Unsupervised (including minors)
- ☐ Not Known

- ☐ Language
- ☐ Physically Restrained
- ☐ Unconscious
- ☐ Not Known/Not Recorded

◀ Back

Save

Save and Continue

# Injury Screen – Save & Continue

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**Abuse**  
  
**AbuseReport:** - AbuseReport - \*  
**Investigation of physical abuse:** - Investigation of physical abuse - \*  
**Caregiver at Discharge:** - Caregiver at Discharge - \*

**Barriers To Patient Care**  
  

<input type="checkbox"/> Developmentally Impaired	<input type="checkbox"/> Hearing Impaired	<input type="checkbox"/> Language
<input type="checkbox"/> Physically Impaired	<input type="checkbox"/> None	<input type="checkbox"/> Physically Restrained
<input type="checkbox"/> Speech Impaired	<input type="checkbox"/> Unattended or Unsupervised (including minors)	<input type="checkbox"/> Unconscious
<input checked="" type="checkbox"/> Not Applicable	<input type="checkbox"/> Not Known	<input type="checkbox"/> Not Known/Not Recorded

[< Back](#)[Save](#)[Save and Continue](#)

